

# DIVISION OF DISABILITY SERVICES

# VISIONS

Volume 1, Issue 1    October 2001

William A.B. Ditto, Director

## ***Office of Disability Services Becomes a Division***

The State Office of Disability Services (ODS) has become a full division and has taken on added responsibilities within the New Jersey Department of Human Services.

The new Division of Disability Services (DDS) will continue to be responsible for all ODS activities, including responding to as many as 5,000 inquiries and requests for information or assistance on disability-related issues each year. Many of these come in through the toll-free information line (888-285-3036).

In addition, DDS has assumed responsibility for seven programs that serve people living in the community with permanent or temporary disabilities and which previously were administered through the state's Medicaid program. Six of these are Medicaid home- and community-based services waiver programs that assist people with disabilities, who otherwise might require institutionalization, to live independently in the community. The seventh is a Medicaid benefit available to any beneficiary who is temporarily disabled and needs assistance with daily activities.

***Division, continued on page 3***

## ***PASP Begins Pilot Program***

### ***Hunterdon and Essex Counties Break New Ground***

**Michael A. Nuskey**

Program Manager, PASP  
Division of Disability Services

The Personal Assistance Services Program (PASP) has been exploring alternatives to existing methods for the delivery of services to consumers. The purpose for this is to determine whether or not consumers will receive greater satisfaction in meeting their service needs by having more control and choices in how those needs are to be met.

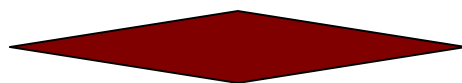
As of March 2000, Hunterdon County's PASP program became the first county to pilot a Cash Option model within the administration of the program. Under this model the consumers are given a cash grant that is derived by cashing out their service hours awarded at the existing reimbursement rates and placing the funds into an account. Consumers are required to develop a cash-management plan which indicates how they intend to use the funds to meet their personal assistance needs. The plan must be approved by the Division of Disability Services.

Consumers are given a variety of options for using their cash grant, which include hiring workers, purchasing services or adaptive equipment from agencies, or financing modifications to their home, vehicle, etc. They develop their plans in consultation with the county agency. The cash grant accounts are maintained by a fiscal intermediary service agency which serves as the business agent for the consumer, and helps them process payroll checks and pay bills for purchases made by the consumer. As of July 2001, Essex County became the second county to pilot the cash option model under PASP and will serve 35 consumers currently.

For more information, please contact Michael Nuskey at the Division of Disability Services, (609) 292-7800. ♦

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## SAVE THE DATE

### October

- Head Injury/Brain Injury Awareness Month
- Healthy Lung Month
- Lupus Awareness Month
- Mental Health Awareness Month
- National AIDS/HIV Awareness Month
- National Breast Cancer Awareness Month
- Spina Bifida Awareness Month
- Sudden Infant Death Syndrome Awareness Month
- Gloucester County **glaucoma screening**, Women's Health Summit. Contact Gloucester ODS, (856) 384-6980.
- October 6, **Statewide Disabilities Convention**, Atlantic City. Sponsored by the DD Council. Contact (609) 292-3745.
- October 11, The Atrium Country Club, West Orange. ***Drug Facilitated Sexual Assault: The Rapist's New Weapon.*** Sponsored by Essex County ODS and the United Way of Essex County. Contact (973) 228-8230.
- October 23, Pines Manor, Rt. 27, Edison, NJ. ***7<sup>th</sup> Annual Family Support Awareness Day – "Caregivers: Always on Call."***

### November

- Alzheimer's Awareness Month
- Diabetes Awareness Month
- Epilepsy Awareness Month
- National Home Care Month
- November 12, New Jersey Hospital Association Conference Center. ***The Faith Factor: Is Religion Good for Your Health?*** Contact Bill Gaventa, The Boggs Center, 732-235-9304, [gaventwi@umdnj.edu](mailto:gaventwi@umdnj.edu)

### Visit our website!

The Division of Disability Services is on the Internet at:

<http://www.state.nj.us/humanservices/dds/>

## VISIONS

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New Jersey Department of Human Services  
Division of Disability Services  
P.O. Box 700  
Trenton, NJ 08625  
(609) 292-7800  
(888) 285-3036  
Fax: (609) 292-1233  
TTY: (609) 292-1210

**Honorable Donald T. DiFrancesco**, Acting Governor

**James W. Smith, Jr.**, Acting Commissioner, Department of Human Services

**William A.B. Ditto**, Director, Division of Disability Services

**Javier Robles**, Deputy Director, Division of Disability Services

**Joseph M. Amoroso**, Supervisor, Information and Referral Services

**Christine Cripps-Barker**, Information and Referral Specialist

**Marlene L. Hester**, Information and Referral Specialist

**Kristy Ahrlich**, Intern, Information and Referral

### CORRECTION POLICY

It is our policy to correct all significant errors. If you believe we have made such an error, please contact Joseph Amoroso at the Division of Disability Services, (609) 292-7800, or write to him at P.O. Box 700, Trenton, NJ 08625-0700.

### CONTRIBUTIONS

We welcome contributions from New Jersey disability service providers and organizations. If you would like to contribute to subsequent issues of this newsletter, please contact Joseph Amoroso at the Division of Disability Services, P.O. Box 700, Trenton, NJ 08625, or fax information to (609) 292-1233.

### **Division, continued from page 1**

As a result of this reorganization, the Division's budget in fiscal '02 will be \$265 million, compared with the ODS budget in fiscal '01 of \$8 million.

"By locating these special programs and services within this new division, New Jersey is reaffirming its commitment to people with disabilities," said Department of Human Services Acting Commissioner Jim Smith. "DDS will be doing work that underscores our philosophy of supporting opportunities for people with disabilities to live as independently as possible."

William Ditto, who headed ODS since its inception in 1997, has been named director of the new division.

"We feel this development is very exciting," said Ditto. "It will allow the state to do a much better job of serving people with disabilities who live in the community. It also proves how seriously we feel about the needs and concerns of people who have disabilities."

The main focus at DDS is on people who become disabled as adults, either through an accident or illness. However, its information and referral services are available to anyone with a question about any type of disability. When appropriate, callers might be referred to other divisions within DHS, including the Division of Developmental Disabilities (DDD), the Division of the Deaf and Hard of Hearing (DDHH), the Commission for the Blind and Visually Impaired (CBVI) or the Division of Mental Health Services (DMHS). DDS also provides information on other national, state, local, non-profit and private programs that serve people with disabilities and works closely with organizations and agencies such as the state's Independent Living Centers and the county offices for the disabled.

Programs new to the division include:

**The ABC Waiver.** This program serves medically fragile children who are under the care and supervision of the Division of Youth and Family Services (DYFS). It provides full Medicaid benefits plus a number of special services, such as transportation and specialized medical equipment and supplies.

**AIDS Community Care Alternatives Program (ACCAP).** At any one time, this program can serve a maximum of 1,000 people statewide, including those of any age with AIDS and children up to age 13 who are HIV positive. It provides full Medicaid benefits plus case management, private-duty nursing, medical day care, personal care assistant services, certain narcotic and drug abuse treatments at home and hospice care. Children

receive additional benefits, including placement in a specialized group foster care home or reimbursement to their foster parents, through DYFS.

**Model Waivers 1, 2 and 3.** These three programs serve a maximum of 250 disabled Medicaid beneficiaries of all ages at any given time. They are designed to provide services in addition to full Medicaid benefits to people who otherwise would be unable to live in the community and would probably have to move into a nursing home or other institution. The 150 people covered under Model Waiver 3 also are eligible for private duty nursing.

**TBI (Traumatic Brain Injury) Waiver.** This program serves people between 18 and 64 who have survived a traumatic brain injury. People in the program receive full Medicaid benefits plus additional services including case management, a structured day program, a personal care assistant, transportation, respite care and night supervision.

**Personal Care Assistant (PCA) Services.** This is an optional benefit offered to New Jersey Medicaid beneficiaries who are experiencing some functional impairment and need assistance with some aspects of daily living. Recipients must have a doctor's order to receive this service, but they do not have to be permanently disabled. An estimated 15,000 people receive this service at any given time.

Programs that will continue to be administered by DDS:

**Ticket to Work:** This program, created last year through federal legislation, offers people with disabilities who are working, and whose income would otherwise make them ineligible for Medicaid, the opportunity to pay a small premium and receive full NJ Medicaid coverage. This is crucial for many people with disabilities because Medicaid benefits are more comprehensive and better address the day-to-day needs of people with disabilities than benefits offered through most private health insurance plans. People with disabilities can qualify for the program with annual gross earned incomes as high as \$42,950.

**Personal Assistance Services Program.** This program provides routine, non-medical assistance to people with disabilities who are employed, involved in community volunteer work or attending school. Personal assistants help with tasks such as light housekeeping, bathing, dressing, preparing meals, shopping, driving or using public transportation. The number of hours a person receives depends on individual need but can be as great as 40 hours per week.

**Division, continued on page 4**

**Division, continued from page 3**

**Personal Preference.** This research program, which is being done in conjunction with the Robert Wood Johnson Foundation, is studying the effects of allowing disabled Medicaid recipients who are eligible for Personal Care Assistant services the opportunity to direct their own care. The study will compare their experience to the traditional method of providing the experience to the traditional method of providing the same services through an agency. New Jersey is one of three states participating in this federally sponsored study. The results will help determine how personal care services are provided in the future.

**Information and Referral.** The Division will continue to operate the toll-free information line, 888-285-3036, and answer questions on any issues affecting people with disabilities. ♦

*Reprinted from Department of Human Services News, July 2001.*

## **High Court to Hear Three ADA Related Cases**

**Joseph Amoroso**

Supervisor of Information and Referral Services  
Division of Disability Services

The Supreme Court has slated three cases to its 2002 docket that could have substantial impact on the implementation and enforcement of the Americans with Disabilities Act of 1990 (ADA).

In the case of **EEOC vs. Waffle House**, the court will hear arguments concerning whether or not the EEOC, when seeking damages on behalf of a plaintiff in a Civil Rights Case, can include the payment of back wages as part of the settlement.

The original 1994 case from the 4<sup>th</sup> district court began when Eric Scott Barker filed a Civil Rights suit against his employer, Waffle House, Inc., through the EEOC, when he was terminated after an on the job seizure. The matter was decided in Barker's favor, and the EEOC sought to have Barker reinstated with back pay. The matter was overturned in favor of Waffle House on appeal, citing a prohibition against back pay stated in the Waffle House collective bargaining agreements, and enforced by Barker's employment application.

**Court, continued on page 6**

## **Personal Preference Q&A**

**Carolyn M. Selick**

Program Manager, Personal Preference Program  
Division of Disability Services

**Q: Can you provide a general idea of the criteria for the program?**

A: People in the program have to be at least 18 years of age and be eligible for Medicaid Personal Care Assistance services for a period expected to last at least six months. Cash grants are based on the cash value of the established number of PCA hours awarded.

**Q: What about people on Medicaid waivers?**

A: Unfortunately, this program is a research and demonstration project, and cannot accept people on Medicaid waivers. There is one exception: people on the DDD Community Care waiver are eligible to participate.

**Q: I understand that cash grants from the Personal Preference Program are different from using regular agency PCA services. What's the difference?**

A: Yes, the Personal Preference grants are very different. Consumers who receive the grants can hire anyone they wish to be their caregiver. We have people hiring their relatives, friends, and neighbors. In many cases, these are people who would never work for a stranger or for an agency. Also, consumers can use part of their cash grant to purchase items that will make them more independent.

**Q: That's interesting. What kinds of things can be purchased using a cash grant, other than PCA service?**

A: There have been some consumers who have been really creative using their grants. Some folks purchase durable medical equipment, small appliances, and other services like house cleaning, laundry, yard work, and cooking. We will consider most requests, but generally the item needs to increase the consumer's overall independence and quality of life.

**Q: Are there any items that can't be purchased using a cash grant?**

A: Yes. Consumables like food are prohibited, as are prescription drugs and over-the-counter medications. Luxury items and entertainment expenses are also prohibited. Consumers may not use their cash grant to pay for other bills, such as credit cards or utility expenses.

**Q: What if a consumer is interested in the program, but doesn't feel comfortable doing their own cash management plan?**

A: Each consumer is assigned a consultant to assist them with the formation and implementation of their cash management plan for the duration of their participation.



## CONSUMER PERSPECTIVE

### ***“Do consumer directed services work?”***

**Tammy Svihla**  
High Bridge, NJ

I recently attended the Independent Choices Conference in Washington, DC as a representative consumer for the Personal Preference Program. Until the conference I had no idea as to the importance of this program to so many people, myself included. Hearing about other people's experiences and hearing what the Division of Disability Services has gone through to bring us this program has given me a new perspective on this groundbreaking program we are in. I also came to see that we as consumers, families, and the public need to become involved to keep the idea of consumer direction alive and expanding.

The idea of consumer direction is met with much resistance, especially the decision to give poor people a cash grant and trust that we will make good choices. Consumer direction means turning over some power to the people who need it most. It also means change, and we often resist change. Too often, I saw resistance to the change that consumer direction brings, even from the participating states. To be open to change is one of the biggest challenges we have in our lives. The Robert Wood Johnson Foundation is sponsoring these changes for the time being, but what comes next? I've been asking myself that question. As a consumer, I don't want to be put back into the traditional plan of service. It is very frustrating to be put in a box and not be considered as an individual. At the conference, I found that other consumers shared similar feelings. Our needs are as diverse as our disabilities are. With consumer direction, we can decide what works for us.

While listening to the presentations, I became very aware of the need for more funding to allow consumer-directed programs to expand and grow. The population of the disabled and the elderly are growing at alarming rates, and traditional care is not the answer. Home health aides are not available in many areas because agencies are horribly understaffed. There is a sharp decline in people entering this profession, low pay rates being only one discouragement. Being able to hire outside the agencies has become a necessity for many of us. And unfortunately, some agencies don't hire the quality of people needed, as I know from personal experience. I am now a single parent of three, and the people coming into my home affect not only me, but also my children, since the quality of service I receive affects my ability to parent. For example, I recently had to fire my own employee because of her interaction in my home and family. Now I can replace her with someone of my choosing. As a parent, I expect an employee to respect my family members as well. I now have the choice of who is in my home. At the conference, I found the hiring of family members to be a key

component of care for many people. Unlike many states, New Jersey allows payment of a salary to a spouse who, in many cases, is already providing care regardless of pay.

The program is a model to be proud of. We are very fortunate in the rules set by the State Office; Mr. Ditto and staff have set up a very consumer-friendly program. In comparison to some other models of programs, ours has a level of compassion and individuality brought about by Mr. Ditto. The people on our state office staff are pioneers in the vision of consumer direction. At the conference, I came to some understanding of the work that went into getting this program off the ground. For example, we needed special waivers that are not easy to get, but Mr. Ditto got them. I have a new respect for our state office and all the staff. Before the conference I didn't think too much about the work required of them, but I realized that they are one of the numerous components needed for self-directed programs to work.

I was astounded at the diversity of the conference attendants. There were representatives from all levels of government, advocacy groups, numerous associations, financial organizations, researchers, and more. As a consumer, I realized the need for my involvement in advocacy. We consumers need to bring a face to this program. We can write our government officials to let them know how this program has changed our lives. We can testify at hearings concerning these issues. We can support one another. Most importantly, we can help decide how self-direction changes. I know people are listening; the conference showed me that. We are individuals with individual needs, and we should let our voices be heard. As a consumer, I have to recognize that this is an evolving project and be prepared for the inevitable glitches that may come along. I also have to be realistic in what are legitimate needs for my care. Patience is a must, since this is new to everyone. There has to be mutual respect and an element of trust on all sides. The eyes of the world are on us, looking for clues as to how this can work. We are all responsible for taking this program to the next level.

We are so very fortunate to have this program and to be leaders in the future of direct care. The amount of knowledge I obtained at the conference was a bit overwhelming at first, but now I have a much clearer understanding of how consumer-directed care works. Seeing hundreds of people from so many different fields was an honor and a privilege. We have been given an awesome responsibility and the chance to live our lives as more fully participating members of society.

Before this program I was suffering a deep depression, frustration, cynicism, and a feeling of isolation. It affected everyone around me. I now have choices; I'm no longer isolated and angry. I have hope in my life and a feeling of usefulness. I am a better parent and a better person. I have a vision for the future; I'm interested in participating in life again. Do consumer directed services work? ***Absolutely.*** ♦

## **DDC Sponsors the First Women with Disabilities Health Care Summit**

### **Christine Cripps-Barker**

Information and Referral Specialist  
Division of Disability Services

Women with disabilities from across the state gathered on Saturday June 16, 2001 at the Hilton Woodbridge Hotel in Iselin, New Jersey to attend the first "Women with Disabilities Health Care Summit (WWDHCS): Strategies for Change, sponsored by the Developmental Disabilities Council.

June Isaacson Kailes, the keynote speaker, has operated a full-time consulting practice since 1989. She consults, writes, and trains on ADA implementation, advocacy training and skills building; health, wellness and aging with a disability; developing and analyzing disability-related public policy; planning barrier free meetings; disability diversity training; reaching the disability market; accessible telecommunication, disaster preparedness for people with disabilities. She is most recognized as a leader for her work in the independent living movement. Kailes began the day by presenting a national perspective on health, wellness, and aging with a disability.

The program attendees were given a choice of four workshops:

Women's Health and Disability as a Public Health Issue:  
Access to Care, Paying for Care, Research and Funding,  
ADA issues

Women with Disabilities through the Lifecycle: Sexual and Reproductive Health, Menopause

Health Conditions Resulting from Disability and Aging

Staying Well: Fitness, Exercise, Nutrition, Prevention and Screenings.

Following the workshops, each group made a presentation on the workshop that they attended. Participants had the opportunity to brainstorm ideas for future programs. Issues discussed included access to care, transportation, research, funding and health insurance related issues, attitudinal problems by primary care doctors, and the correlations between health conditions and aging.

As a program participant, I realized that it is a real struggle for women with disabilities to receive health care that is delivered in a sensitive, non-discriminatory manner that addresses their unique needs. It became clear to me that there is a lot of work to be done to advance the health rights of women with disabilities. Most importantly, I walked

away from the summit feeling empowered by an amazing group of women, who demand to be acknowledged and recognized as people. Health care providers should recognize that although a disability exists and creates problems, women with disabilities should expect to maintain a high quality of life and wellness.

Steering Committees are being formed by the WWDHCS to review the comments and suggestions from the summit. The steering committees will have the responsibilities to discuss problems, create solutions and identify goals to advance the health-related rights of women with disabilities. Anyone interested in participating in the steering committees should contact Pat Krupka at the DDC, at 609-292-3745. ♦

### **Court, continued from page 4**

In **Edelman v. Lynchburg College** the court will again deliberate an EEOC related matter, as it considers the statute of limitations as it relates to civil rights cases investigated by the EEOC.

**Williams v. Toyota** will review the question of "reasonable accommodation" in the workplace. The plaintiff, Ella Williams, claims that she developed carpal tunnel syndrome in both wrists, and back and neck pain after three months of work at a Toyota plant. She continued working in severe pain and was moved to a less physically demanding job. When the pain recurred, Toyota refused to again amend her job tasks. Williams filed suit for failure to accommodate her as a person with a disability. Williams began a pattern of frequent absenteeism from work, and was dismissed.

Toyota contends that Williams was not a person with a disability as defined by law, because her impairments did not preclude her from doing any life activities other than some of the tasks specifically related to her job. They also state that they have met their burden to accommodate, when Williams first self identified as a person with a disability at the initial onset of her condition.

The District Court of Kentucky ruled for Williams in 1999 and Toyota appealed to the 6<sup>th</sup> Circuit Court of Appeals. The 6<sup>th</sup> Circuit ruled 2-1 for Williams, agreeing she was substantially disabled because her impairments made it difficult to perform a range of tasks. The appeals court also agreed that working is a major life activity covered under the ADA. Toyota, seeking final settlement of the matter, petitioned the Supreme Court, and the case is pending. ♦

## ***AIRS-NJ Offers Help to Information and Referral Professionals***

**Marlene L. Hester**

Information and Referral Specialist  
Division of Disability Services

**AIRS-NJ** (Alliance of Information and Referral Services of New Jersey, Inc.) is the umbrella association for professionals in the field of information and referral.

Incorporated in 1985, **AIRS-NJ** is a local affiliate of the National Alliance of Information and Referral Systems, Inc., located in Seattle, Washington. The organization was founded to provide training, networking opportunities, sharing of ideas, and certification for information and referral providers.

Professional certification of individuals and accreditation of agencies is available to those who pass the rigorous certification standards set forth by the national AIRS board.

AIRS-NJ also provides several training opportunities and events throughout the year. Individuals or agencies wishing to get involved should contact Fran Palm, AIRS-NJ President, c/o First Call for Help, United Way of Greater Mercer County, 3131 Princeton Pike, Building 4, Lawrenceville, NJ 08648-0193, or via the internet at [www.aclink.org/AIRS-NJ/](http://www.aclink.org/AIRS-NJ/). ♦

## ***Ticket To Work Staff On Board***

DDS Division Director William A.B. Ditto announced the hiring of Michael Hehir and Pablo Viera to staff the Ticket To Work project.

Mr. Viera will assume the role of Project Manager and brings a wealth of experience in working with the disability community, most notably a five-year tenure with the ADA Technical Assistance Center. He is a graduate of Cedarville College in Ohio, with a bachelor's degree in both accounting and finance.

Mr. Hehir comes to his new position as a Medicaid Project Specialist after a three-year tenure with the Middlesex County Board of Social Services. He holds a B.A. in social science from Florida Atlantic University.

"We feel very fortunate to have both Michael and Pablo join the DDS staff. Combined, they have nearly two decades of professional social service experience," stated Ditto. ♦

## ***Ticket to Work Medicaid Buy-In Program Begins***

New Jersey has developed a Medicaid Buy-In Program for individuals with permanent disabilities, between the ages of 16 and 65, who are employed. This program is being established under the authority of the federal Ticket to Work/Work Incentives Improvement Act of 1999 and Chapter 116 of the PL 2000 of New Jersey. The program provides full NJ Medicaid coverage to eligible applicants, subject to the payment of a modest monthly premium.

The program's purpose is to provide an opportunity to purchase Medicaid coverage for persons with disabilities who are working, despite the presence of a disability, and whose earnings would otherwise disqualify them for Medicaid coverage.

In order to meet the eligibility criteria, an individual must be between the ages of 16 and 64, have a permanent disability as determined by the Social Security Administration or Disability Review Team of the NJ Division of Medical Assistance and Health Services, and be employed (full or part time).

All of the following guidelines for income apply. Social Security Disability Benefits/Railroad Retirement System Benefits received by the individual on their own account are not counted. Unearned income, such as pensions, interest, private disability, or retirement benefits cannot exceed 100% of the federal poverty level, which is currently \$716 for an individual and \$968 for a couple. Earned income cannot exceed 250% of the federal poverty level. With disregards, this means that an individual can earn up to \$42,950 per year (\$3,579 per month) and still qualify as long as his or her unearned income does not exceed 100% of the federal poverty level.

Assets must be \$20,000 or less for an individual, \$30,000 or less for a married couple. This does *not* include the value of a vehicle used for medical and/or work transportation or the home in which the individual or couple lives. Also excluded from the asset calculation are funds in an IRA/401K account.

Individuals with income (after disregards) in excess of 150% of the federal poverty level are required to pay a monthly premium of \$25 for their Medicaid coverage. The premium is \$50 for a married couple.

Questions? Need more information? Want to start an application? Please call the New Jersey State Division of Disability Services, toll free, at **1-888-285-3036**. ♦

## STATE HOUSE NEWS

### **DiFrancesco Highlights Senior Gold Plan**

Acting Governor Donald T. DiFrancesco highlighted his \$400 million Property Tax Relief Now! package and landmark Senior Gold prescription discount program for moderate income seniors during an April 9 visit to the Garfield Senior Activity Center in Bergen County.

"I have always believed New Jersey seniors are a vital part of making our state all it can be. It is of the utmost importance to me that our seniors receive the best services we are able to provide. That is why I support discount prescription drug coverage for moderate-income seniors under the Senior Gold program and a boost in the Homestead Rebate program, the first in 10 years," DiFrancesco stated.

The \$60 million Senior Gold program, a DiFrancesco initiative that has passed the Senate and cleared the Assembly Seniors Issues and Community Service committee, would provide discount prescription assistance to moderate income seniors who fall through the cracks of prescription coverage. There are approximately 100,000 seniors in New Jersey who lack prescription coverage and would benefit from this program.

For information on the Senior Gold program, please call toll-free (800) 792-9745. ♦

### **PAAD vs. Senior Gold**

#### **Income Limits**

PAAD limit for single is \$19,238 and married is \$23,589. Senior Gold limit for single is \$29,238 and married is \$33,589.

#### **Co-Pay**

PAAD co-pay is \$5 per prescription. Senior Gold co-pay is \$15 + 50% of the remainder cost of the prescription.

#### **Primary Plan Used**

If the beneficiary has any other plan of assistance or insurance coverage which is better than PAAD, the other plan must be used first. If the beneficiary has any other plan of assistance or insurance coverage which is better than Senior Gold, both plans must be used in order to capture to co-pay from the other plan.

#### **Prescription Supply**

PAAD allows for a 34-day supply for initial new prescription and refills for 34-day supply or 100 units, whichever is greater. Senior Gold allows the same day supply as PAAD.

### **Bill Extends Veterans' Tax Exemption**

On May 7, Acting Governor Donald T. DiFrancesco signed legislation extending the tax break on military pensions to all veterans.

The acting Governor signed the bill during the celebration of Vietnam Veterans' Remembrance Day at the New Jersey Vietnam Veterans' Memorial. After the bill signing, he participated in the groundbreaking of the Women's Veterans' Garden, which will be built beside New Jersey's Vietnam Veterans Memorial in Holmdel.

"New Jersey honors its veterans in many ways, including tax relief. Pensions and survivor benefits should not be treated like other income. They are an acknowledgement of our veterans' contributions to our state and nation and should not be subject to tax regardless of age," said the acting Governor.

The bill, A-1256, excludes the military pensions and survivor's benefits of those under age 62 from being included in gross income for tax purposes. The current gross income tax exemption applies only to those individuals over 62 years of age. This bill takes effect immediately and will be retroactive to January 1, 2001. Senators Anthony Bucco and Joseph Kyrillos and Assembly members Melvin Cottrell and Joseph Malone sponsored the legislation.

"This is a day we acknowledge the 200,000 New Jersey residents who served during the Vietnam era and honor the memory of the 1,556 who did not return from the battlefield," said DiFrancesco.

"That acknowledgement can be expressed a number of ways. It can be a monument like the New Jersey Vietnam Veterans Memorial, a piece of legislation like A-1256 or a garden, like the one we have broken ground for here today honoring contributions of our female Vietnam veterans," said the acting Governor.

Female Vietnam veterans and local garden clubs designed the memorial garden, which will be located between the New Jersey Vietnam Veterans Memorial and the Education Center.

The Garden is a joint effort between the Department of Military and Veteran's Affairs (DMAVA) and the Garden State Parkway Authority.

"When this garden is completed we will have a living monument that honors our vets. If every war is a teacher, New Jersey has learned its lesson well. We do not forget our veterans, we honor them," concluded DiFrancesco. ♦



## **DiFrancesco Signs Landmark HMO Right To Sue Legislation**

On July 30, Acting Governor Donald T. DiFrancesco signed legislation giving patients the right to sue their health maintenance organizations (HMOs) for delay or denial of care resulting in serious harm.

“While Congress has once again delayed consideration of managed care reform in Washington, here in New Jersey we are enacting bipartisan solutions right now. From being one of the first states to enact a patient’s bill of rights to the recently enacted Senior Gold discount prescription drug programs for seniors and the disabled, New Jersey has long been a national leader in health care policy. And with today’s signing of legislation giving patients the right to sue their health insurance companies New Jersey is again at the forefront of health care policy,” stated DiFrancesco.

The new law provides consumers with the right to sue their HMO if the insurer’s decision to deny or delay care results in serious harm. In those cases where the serious harm threshold has not been set, patients will first appeal the HMO’s care decision through the Independent Health Care Appeals Program and, if no resolution is met, will be able to file suit.

“By utilizing an independent review process, we will safeguard against frivolous lawsuits that could result in increased health care costs, while serving the clear purpose of protecting patients and their families. The legislation is aimed at increasing quality health practices—not lawsuits.

“This new protection is good for patients and preserves the doctor-patient relationship. It also makes our patient’s bill of rights one of the strongest in the nation,” remarked the acting Governor.

Right to sue legislation is the latest addition to the many programs New Jersey has instituted in recent years to improve the state’s health care system. In addition to the patients’ bill of rights and NJ FamilyCare, the recently enacted Senior Gold program is providing discount prescription drugs to middle-income seniors and the disabled. Taken as a whole, these bills will truly empower New Jersey’s patients by providing greater accountability within the health care system, as well as improving access and affordability of services.

The Health Care Carrier Accountability Act was sponsored by Senators Len Connors (R-Atlantic/Burlington/Ocean), Bob Singer (R-Burlington/Monmouth/Ocean), Lou Bassano (R-Essex/Union) and Shirley Turner (D-Mercer) and by Assemblymembers Steve Corodemus (R-Monmouth), Guy Talarico (R-Bergen), John Kelly (R-Bergen/Essex/Passaic) and Reed Gusciora (D-Mercer).

“I’ve said it before—health care decisions should be made in a doctor’s office, not in an insurance company boardroom. The best possible care should be foremost in any decision made for patients. And we, here in New Jersey, want to make sure it stays that way,” DiFrancesco concluded. ♦

## **Acting Governor Signs Disability-Related Legislation**

On August 8, Acting Governor Donald T. DiFrancesco signed the following legislation:

**A-3050**, sponsored by Assemblymen Neil Cohen (D-Union) and Nia Gill (D-Essex), termed, “Leonard Cohen’s Law,” prohibits a licensed hospital from transferring a patient to another health care facility unless the patient is accompanied by a complete discharge summary from the transferring hospital at the time of the transfer.

**S-1330**, sponsored by Senators Robert Littrell (R-Sussex/Hunterdon/Morris) and Jack Sinagra (R-Middlesex) and Assembly members Nicholas Felice (R-Bergen/Passaic) and Charlotte Vandervalk (R-Bergen), requires health insurers that provide prescription drug coverage to issue standardized pharmacy identification cards to decrease administrative burdens and to streamline the dispensing of prescription drugs and devices.

**A-2204**, sponsored by Senators Diane Allen (R-Burlington/Camden) and Richard Codey (D-Essex) and Assemblymen Frank Blee (R-Atlantic) and Joseph Charles (D-Hudson), renames the Office of Minority Health in the Department of Health and Senior Services (DHSS) as Office on Minority and Multicultural Health and provides additional responsibilities for the office and appropriates \$1.5 million to the new office to implement the bill. ♦

## **DiFrancesco Proclaims Post-Polio Awareness Week**

Post-Polio Awareness Week was observed in New Jersey from August 26 to September 1, according to a proclamation issued August 10 by Acting Governor Donald T. DiFrancesco. The last week in August is symbolic of the period each year when poliomyelitis, “the summer plague,” hit its peak in the epidemic years between the early 1900s and the 1950s.

It is estimated that over 30,000 survivors of polio are still living in New Jersey alone, with perhaps 1.63 million, nationwide. In recent years, a phenomenon called post-polio syndrome—not a recurrence of the disease, but an array of late effects—has caused new alarm among polio survivors and problems for a medical community not trained in dealing with a disease that was thought to have been erased by the Salk and Sabin polio vaccines over 40 years ago. To obtain information about post-polio syndrome (PPS), call the New Jersey Polio Network at (201) 845-6860. ♦

## AROUND THE STATE

### Atlantic County

The Atlantic County Office of Disability Services announces the 2001 Donald J. Sykes Award, presented annually to an outstanding individual with a disability. The award will be presented in October, celebrated as disABILITY Awareness Month.

This will be the thirteenth year Atlantic County has presented this award that was later named in memory of Donald J. Sykes, a longtime community leader and past chairman of the county's Disabled Citizen Advisory Board. Sykes died in 1991.

Nominees must be county residents with a disability that interferes with one or more of life's activities, such as employment, education, transportation, recreation or socialization. Nominees must have contributed to improving the quality of life for themselves or others and have helped dispel the myths that typically surround persons with disabilities. Individuals of all ages may be nominated. The winner will be selected by a panel of judges. ♦

*Reprinted from Atlantic County ODS press release, June 25.*

### Bergen County

The Bergen County Division on Disability Services has published a brochure for employers, **It's All About Work! Exploring an Untapped Labor Pool.** The booklet's purpose is "to encourage business owners, managers, and human resources personnel to tap the vast potential among people with disabilities for gainful employment in the Bergen County area. It aims to dispel myths and provide some helpful do's and don'ts, as well as useful resources," according to the division's Advisory Board. To obtain a copy of the brochure, please contact the Bergen County Division on Disability Services at (201) 336-6500. ♦

*Reprinted from Bergen County DDS brochure.*

### Gloucester County

Spearheaded by the Office of Disability Services, Visually Impaired Co-Partners of Gloucester County (VISCOP) received a much-needed donation of \$25,000 from *Drugstore.com* on June 27, 2001. VISCOP, a non-profit organization serving about a hundred county residents, has for the past 10 years offered sessions to the blind—assistance in gaining self-sufficiency through arts and crafts, counseling, Braille lessons and such—three days a week in a local church social center. The group has outgrown its present facility and has begun collecting funds to erect a learning center of their own. This donation will move it that much closer. The Office of Disability Services provides assistant and other support services to this worthy organization. ♦

*Reprinted from Gloucester County news release, July 2001.*

### Ocean County

The Children's Home Society of NJ is piloting an exciting new program, The Special Needs Network. They will be training state registered family child providers in certain special needs areas such as: asthma, attention deficit disorder, autism, cerebral palsy, Down syndrome and other disabilities. In addition, care providers will receive monthly home visits to provide technical assistance and support. Training will be provided for parents as well as providers. For more information, contact Joanne Nelson at the CHILDREN'S HOME SOCIETY, (732) 905-6363 x 131.

**Visually Impaired Support Group in Manahawkin** meets in the last Wednesday of the month, at the Family Resource Room on the 3<sup>rd</sup> floor of the Southern Ocean County Hospital, 1140 Route 72 West, Manahawkin, NJ 08050. The meetings start at 2:30 p.m. til 4:00. For information please call Tom Jackson at (609) 597-6011. ♦

*Reprinted from The Barrier Free Press, Ocean County DHS, Summer 2001.*

### Union County

New Jersey Connect and the Henry H. Kessler Foundation have developed a 14-unit, fully accessible apartment building to meet the needs of individuals with physical disabilities. This two-story, barrier-free facility, scheduled for completion in July 2001, will be located on a .88 acre site on Hillside Avenue in Springfield, New Jersey.

Freeman Apartments will consist of 12 one-bedroom apartments and 2 two-bedroom apartments. Freeman Apartments is a barrier-free structure and all units have numerous accessibility features incorporated into their design, including wide doorways and hallways, roll-in showers, grab bars, lower pantries in the kitchen and extra square footage to accommodate wheelchairs. Kitchens will also be equipped with side-by-side refrigerators and range tops with front-mounted controls. Safety features include a sprinkler system throughout the building and a door in each unit that leads outside to either a patio or balcony.

The building was designed with direct input from people with disabilities. It is the goal of the partners that made Freeman Apartments a reality, that it shall serve as a model of barrier-free housing design and will truly meet the needs of people with physical disabilities. This enhanced accessibility will make it possible for residents to live independently and greatly improve the quality of their lives. For more information, contact Elisa Sananman at (908) 654-4129. ♦

*Reprinted from NJ Connect news release, July 9, 2001.*

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## **BIANJ and Boggs Center Publish Brain Injury Guide**

**Brain Injury: When the Call Comes, A Congregational Resource** was published in May 2001. It provides first-person accounts from individuals with brain injuries and their families, advice from spiritual leaders of various faith traditions, and contact information and resources on brain injuries and other disabilities.

The publication is a collective project of The Elizabeth M. Boggs Center on Developmental Disabilities, UMDNJ-Robert Wood Johnson Medical School, the Brain Injury Association of New Jersey, Inc. (BIANJ) and the New Brunswick Theological Seminary. It has been guided by a task force of chaplains and pastoral counselors, staff of BIANJ and The Boggs Center, persons with brain injury, and family members.

To obtain a copy of the booklet, please contact the Brain Injury Association of New Jersey at 732-738-1002, or by email at [info@bianj.org](mailto:info@bianj.org). ♦

## **CHLP Brochure Explains Presumptive Eligibility**

After working for about a year with persons infected with HIV, staff members of the Trenton office of the Community Health Law Project began to see that many individuals who could potentially be eligible for Presumptive SSI benefits were unaware of the existence of the benefits. Others attempted to apply for Presumptive Eligibility, but could not persuade their doctors to fill out the necessary form to make them eligible. Women, in particular, appeared to underutilize the program.

In an attempt to have more people apply and become eligible for these benefits, the Law Project designed a brochure targeted for the medical community that explained Presumptive Benefits and the importance of the program. The Law Project also produced a poster that would be hung in local Social Security offices. While the brochures were directed at the medical profession, the posters were directed at individuals making claims for disability benefits.

In addition, the brochure and the Presumptive Eligibility forms are available on the Community Health Law Project's website – [www.chlp.org](http://www.chlp.org). Once on the website, click on programs and then on Presumptive Eligibility.

Please note that entitlement to Presumptive benefits allows an eligible individual to have immediate payment of SSI benefits. The payments can last up to six months while the regular SSI decision is made. Often, the immediate access to Medicaid coverage is even more vital to individuals who are HIV symptomatic. ♦

## **Coalition on Inclusive Ministries Begins Accessibility Campaign**

The Coalition on Inclusive Ministries congratulates and celebrates the 70 plus congregations in New Jersey who joined the National Organization on Disability Accessible Congregations 2000 Campaign. The Campaign continues into 2001. The NOD goal was to have 2000 congregations by the end of 2000, and they ended the year with that goal tantalizingly close. It is not dated, though, and the campaign and national listing will go on.

To join the Accessible Congregations Campaign, a congregation does not have to be completely accessible and inclusive of people with disabilities, but has to pledge itself to that vision and a process for moving that way.

Information about the campaign can easily be obtained from the NOD Web Site, [www.nod.org](http://www.nod.org). They also have a new questionnaire, *A Congregational Journey*, that helps congregations think through the kinds of issues they need to address on accessibility and welcome. To get a copy of the information, you can also call Lorraine Thal at 202-293-5960.

The Coalition has contacted these congregations in New Jersey. We hope that later in the year, we will be able to devote an issue of our newsletter to some of the stories of how these participating congregations have used the Campaign in their own congregation. Again, New Jersey congregations, congratulations and thank you! ♦

*Reprinted from That All May Worship, NJ Coalition for Inclusive Ministries, Vol. V, No. 1, 2001.*

## **COSAC Workshops and Training Opportunities**

**The Overview of Autism lecture** is designed for professionals who are new to the field of autism. Topics for discussion include an in-depth overview of autism, PDD-NOS and related developmental disabilities, as well as a brief discussion of treatment strategies and components for an effective educational program. This lecture is presented three times per year by COSAC staff: once each in the northern, central and southern regions of New Jersey.

**Workshop and consultation services** are available free to DDD-funded agencies and may be requested by other agencies for a nominal fee. COSAC staff provide workshops on specific topics which are solicited by the agency being served. Topics typically include components of ABA, such as discrete trial, learning theory or functional assessment. An agency may also request our Basic Training workshop which covers all the components of ABA. This ten-hour workshop provides agencies serving individuals with autism with a global understanding of autism and behavioral teaching techniques. Workshop attendees may participate in group activities and role play in order to enhance the understanding of the didactic material.

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For more information, please contact Kimberly Edwards at (609) 883-8100 x26, or Catherine O. Zane at (609) 883-8100 x13. ♦

## **Disability News Service Stops the Press**

On July 9, 2001, DNS Editor Leye Chrzanowski announced that her email service to the disability community will cease publication on August 7, 2001, after a four-year run, citing lack of financial support. Chrzanowski also announced that back issues of the E-zine will be available on the DNS website, [www.disabilitynews.com](http://www.disabilitynews.com), for continued reference. ♦

## **DIAL Announces Writing Contest**

The Unlimited Potential Theater Company (UPTCo), a project of VSA Arts of New Jersey (VSA/NJ) is seeking poems, essays and plays by New Jersey residents, eighteen years of age or older, for its eighth annual New Jersey Wordsmith's Competition. The contest is open to all writers, and submissions by writers with disabilities are especially encouraged. All works submitted will be juried by a panel of judges who are professionally affiliated with theater and/or literature. Selected works will be showcased at the New Jersey Readers Theater followed by a reception to honor the authors. Deadline for submissions is October 1, 2001.

To request an application or to receive additional information, contact Joy Indik, VSA arts of New Jersey, 703 Jersey Avenue, New Brunswick, NJ 08901, (732) 745-3885, or 745-3913 (TTY), [info@vsanjersey.org](mailto:info@vsanjersey.org). ♦

*Reprinted from DIAL newsletter, Volume 14, Spring 2001.*

## **HCFA Changes Name to CMS**

It's out with the old and in with the new. The Health Care Financing Administration (HCFA) is now the Centers for Medicare and Medicaid Services (CMS). It's more than just a new name—it's an increased emphasis on responsiveness to beneficiaries and providers, and quality improvement.

Health and Human Services Secretary Tommy G. Thompson made the announcement on June 14. "We're making quality service the number one priority in this agency," Thompson said. "These sweeping reforms will strengthen our programs and enable our dedicated employees to better serve Medicare and Medicaid beneficiaries, as well as health care providers. We're going to encourage innovation, better educate consumers about their options, and be more responsive to the health care needs of Americans." ♦

The 1-800-MEDICAID number (1-800-633-4227) is being enhanced to provide service to beneficiaries 24 hours a day, seven days a week. For all the details, visit the Social Security homepage at <http://www.ssa.gov>. ♦

*Reprinted from eNews Update, June 15, 2001.*

## **LEAD Program Is a Success**

"Leadership, Education, Advocacy, and Determination" (LEAD), a statewide project for teenagers with vision loss, geared towards the development of a variety of life and leadership skills, has completed another successful season. The components have been varied and valuable and have included skill-building activities of all types, coordinated by six outstanding regional coordinators across the state. We at *hip* are very proud of their efforts since they are the finest role models for the high school students with vision loss for whom LEAD has been designed. Northern coordinators are Joe Ruffalo and Andy Godwin; Central region coordinators are Sherlock Washington and Ohmy Romero. Ever Lee Hairston, who coordinates the southern part of the state along with David Garagozzo, reports here on her impressions of LEAD, including a recent experience at a Leadership Training Program in Washington, DC with LEAD participants. LEAD is administered by Patty Fantin at *hip*'s Hackensack office. She can be reached at (201) 996-9100. ♦

*Reprinted from Hip News, July-September 2001.*

## **MSAA Announces Pathways Program**

MSAA (Multiple Sclerosis Association of America) is offering a program that can help you if your home or apartment needs modifications to make it safe or accessible. Individuals with MS who live in New Jersey, Delaware, Pennsylvania, New York, Rhode Island, New Hampshire, Connecticut, Massachusetts, Maine, or Vermont can contact (800) 833-4672 extension 106 to request information about the Pathways for Independence Program. ♦

*Reprinted from UCPA Advocacy Update, March 2001.*

## **MS Society Programs**

Need to borrow a wheelchair? Is yours getting fixed? Would a scooter be helpful until you are feeling better? Look no further! The **Equipment Loan Program** of the Greater North Jersey Chapter of the National MS Society is here to help. This vital program allows people with MS to borrow, free of charge, equipment that they need for a short period of time. We are able to loan wheelchairs, hoist lifts, scooters, and other various assistive devices. The Equipment Loan Program is easy to use and very beneficial to those who use it. All you need to do is call the Chapter Services Department at 201-986-7539 and request the item you desire. The earlier the request, the more assured you can be of availability. The item is delivered and picked up by the appropriate medical supplier.

**State, continued on page 13**



### **State, continued from page 12**

Need Information? Not sure where to get it? Is going to your library difficult? Do you find they do not have what you are looking for? If you can say yes to any of these, then it's time you learned about **The Lending Library**. The Greater North Jersey Chapter of the National Multiple Sclerosis Society has a library that is available to you. We have a collection of books on various topics, not only on multiple sclerosis, but on the many issues that arise in one's life when one lives with a chronic illness. We also have a collection of video tapes. They are wonderful resources, especially if you need general information about MS. The *Lending Library* operates primarily through the mail. For more information, please call the Chapter Services Department at 201-986-7539.

Are you looking for a free, supervised physical activity that also offers the camaraderie of people with Multiple Sclerosis, together with dedicated volunteers? Then, look no further than Swim-In! Held at the pool area of the Jewish Community Center on the Palisades in Tenafly, Swim-In is in session for two hours every Wednesday from September through May. Since 1975, we have provided a free, once-a-week recreational swimming program where people with MS have an opportunity for therapeutic exercise. Water activity is beneficial for people who have Multiple Sclerosis. This disease, which strikes both young and old, may incapacitate and disable. Limbs often become weakened but the buoyancy of the water permits body movement, which is otherwise difficult. The emotional and psychological benefits of Swim-In are equally valuable. To learn more about Swim-In, please call the National Multiple Sclerosis Society's Greater North Jersey Chapter at 201-986-7539 or 1-800-833-0087. ♦

*Reprinted from MS Society brochures.*

### **NJ Polio Network Approves Funding for Polio Survivors**

The New Jersey Polio Network has allocated \$5,000 to be applied in the year 2001 to the Alan and Peggy Ruprecht Fund. Polio survivors who are residents of New Jersey may apply this year for grants of up to \$500 to help them to purchase necessary medical equipment or services. Among the items that are eligible for grants are wheelchairs, scooters, automobile adaptive equipment, canes, crutches, breathing aids, medical evaluations, transportation for medical need, and visits to physicians or clinics for polio-related treatment. This is the only fund within our geographical sphere created exclusively to assist survivors of polio.

Those who wish to apply for a grant should request an application from Heightened Independence and Progress (or simply *hip*), 131 Main Street, Suite 120, Hackensack, NJ 07601. Phone: 201-996-9100; fax 201-996-9422; e-mail: [ber@hipcil.org](mailto:ber@hipcil.org). (Please note that *hip* is in no way connected with HIP, the insurance carrier.) ♦

*Reprinted from NJ Polio Network Newsletter, Winter 2001.*

### **NJ Tournament of Champions**

The Children's Tournament of Champions is a state-wide program of sports training, physical fitness and athletic competition for Special Education Children, ages 3-21. Our programs are designed to service ALL children currently receiving special services, with the exception of those whose primary classification is Mental Retardation.

The Tournament of Champions helps each youngster learn how to train and compete to the best of their ability. This helps create a success cycle which can help to overcome the pattern of failure and frustration often experienced by special needs children who do not always have opportunities to participate, compete and achieve in sports.

Programs are currently offered in the following areas: Bowling, Basketball, Swimming, Track & Field, Pre-School, and Soccer. Certificates, Ribbons, Medals and Trophies are presented to the athletes in accordance with the sports they participate in.

Contact the Tournament of Champions State Office at 732-462-7945 to receive further information on the programs, to be placed on a program mailing list or to have your questions answered. ♦

*Reprinted from NJ Tournament of Champions Program Information.*

### **New Social Security Website for Women**

Do you employ both men and women, working side by side, doing the same job, and earning the same benefits? As much as employers try to make everything equal, sometimes it isn't. There are some situations, beyond control, that women encounter because of their different work patterns and lifestyles.

Although Social Security benefits and coverage are the same for both men and women, research shows that women live longer than men, earn less than men, are the primary family caregivers, and rely on Social Security for most of their income when they retire.

To help the women you employ learn more about how Social Security can affect their future, tell them about the new Social Security website For Women, <http://www.ssa.gov/women/>. ♦

*Reprinted from SSA ENews, July 17, 2001.*

### **TLC Forms New Social Group**

An organizational meeting of Total Living Center's newly organized social group took place on March 14. The group is "self-run" in that the members decide what activities they wish to pursue and how often they will meet. TLC facilitates the activities chosen, provides a place to meet, and arranges transportation and other accommodations.

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### **State, continued from page 13**

Eva Berling, a staff member at TLC, envisioned a group that embodies the independent living philosophy. "Some organizations offer support groups. Total Living Center offers a 'fun group.' All of us need to have fun. Without fun experiences, we become isolated and depressed, and our problems become bigger than they actually are. Interaction with others in a fun atmosphere gives our thought processes a boost," says Berling.

Anyone wanting to make new friends and have fun can join the group at any time. For more information and directions, call Eva at 965-3734 (voice) or 965-5390 (TTY), or just come to the meetings. (Please request reasonable accommodation two weeks in advance.) ♦

*Reprinted from TLC Newsletter, Spring 2001.*

## **GUEST AUTHOR**

### ***A Wealth of Accessible Support and Learning: DOROT's University Without Walls***

**Betty McLaughlin**

Coordinator, Family Support  
Spina Bifida Association of the Tri-State Region

Now New Jersey residents with physical challenges and limited mobility can become students of DOROT's University Without Walls' (UWW) innovative programming for support and learning – all by telephone in the convenience of their own homes.

Via telephone conference calls, University Without Walls makes it possible to participate in a fascinating variety of **classes** on the Creative and Visual Arts, Book Discussions, Contemporary Issues, History and Culture, Legal and Money Matters, Music and Performing Arts, Judaic Studies, and Health & Wellness Issues. Discussion and social interaction are important focal points for all UWW classes.

Many of New York's most prestigious institutions including The American Museum of Natural History, The Guggenheim Museum, The Museum of Modern Art, New York University Hospital Center, and Columbia Presbyterian Hospital collaborate with UWW by providing course facilitators.

UWW's telephone **support groups**, led by experienced facilitators, help individuals cope with a wide range of life challenges such as vision loss, diabetes, breast cancer, bereavement and other topics.

***University, continued on page 15***

## ***Autonomic Dysreflexia: Common Warning Signs***

**Javier Robles**

Deputy Director

Division of Disability Services

It is estimated that there are between 200,000 and 450,000 people with spinal cord injuries in the United States alone. From this estimated number, many will at one point or another suffer autonomic dysreflexia. This is a life-threatening condition which occurs to people with a spinal cord injury above the T-10 level. Although autonomic dysreflexia is a life-threatening condition, many people have never heard of it. If you or a family member have a spinal cord injury, here is what you should know.

### ***Common warning signs:***

- A fast, major increase in blood pressure—20-40 mm Hg systolic higher than normal.
- A pounding headache
- Heavy sweating
- Flushed or reddened skin
- Goose bumps
- Blurry vision or seeing spots
- A stuffy nose
- Anxiety or jitters
- Tightness in your chest, flutters in your heart or chest, or trouble breathing

### ***If ANY of these signs appears, follow these steps:***

1. Sit up or raise your head to 90 degrees. **Important:** You need to stay sitting or upright until your blood pressure is normal.
2. Loosen or take off anything tight.
3. Monitor your blood pressure about every 5 minutes.
4. Check your bladder for drainage.
5. Call your health-care professional, even if warning signs go away.
6. If warning signs return, repeat steps, call your health-care professional, and go to the emergency room.
7. At the emergency room, tell staff you need immediate care:

- May have dysreflexia.
- Need blood pressure checked.
- Need to remain sitting up.
- Need causes of the problem sought.

For more information on autonomic dysreflexia, see the following websites:

[www.pva.org](http://www.pva.org)

[www.epva.org](http://www.epva.org)

*Reprinted from Paralyzed Veterans of America, 1997.*

All that is required to participate: 50 minutes a week for each course or support group and a telephone.

Kirsten Coulter from New Jersey states, "As a member of the Spina Bifida Association of the Tri-State Region's Women's Telegroup through DOROT's University Without Walls, I have gained a lot of knowledge toward becoming an independent adult. I now have connections to informed and qualified people who have helped me to get involved in the Personal Assistance Services Program which will allow me to pursue my college education. Also I have learned important lessons from other members of my telegroup about effectively communicating my needs. I believe DOROT's telegroups can be beneficial to people of all ages and circumstances."

SBA-TSR's Women with Spina Bifida Telegroup, facilitated by Christine Cripps-Barker, and Men with Spina Bifida Telegroup, facilitated by Dr. Richard Horowitz, offer members the vital opportunity to regularly "meet," support and learn from one another. Without the option of telegroups, regular access to such a specialized forum and the mutual growth and camaraderie of members' evolving relationships would not be possible due to geographic, transportation and other limiting factors. Parents' telegroups are planned for the Fall. DOROT's programs fulfill essential needs for which other accessible resources are rare or nonexistent.

DOROT (which means "generation" in Hebrew) has provided a lifeline of support to New York's homebound and homeless elderly and fostered friendship between the generations for 25 years. Recent funding has made it possible to expand its catchment area to New Jersey for UWW through grants from the Health Care Foundation of New Jersey and The Ricky and Andrew J. Shechtel Philanthropic Fund (serving Essex, Union, Morris, Sussex Counties and the Princeton/Mercer area).

### **What can I find at DOROT's University Without Walls?**

- Teleclasses and telegroups offered over the phone via toll-free conference call
- Interaction with people of shared interests
- Enjoyable learning on important topics
- A forum to express your thoughts and ideas

### **How does University Without Walls work?**

- University Without Walls is a telephone conference call program offered by DOROT, a Manhattan-based non-profit agency.
- DOROT staff members connect the conference calls. No special equipment is necessary. A regular phone is all you need. The phone calls are free.
- Teleclasses and telegroups run 50 minutes, meet 3 to 14 weeks, and are run by facilitators.
- DOROT is happy to design special courses and support groups for your community needs.

### **Is there a fee?**

- There is a one-time registration fee of \$8 and a \$10 tuition fee for each course.
- Scholarships are available.
- Because DOROT calls you ~ you do not pay for the phone call.

For more information about University Without Walls, please call DOROT toll-free at (877) 819-9147, or (212) 769-2850, or visit the DOROT website online at [www.dorotusa.org](http://www.dorotusa.org). ♦

## **Welcome Colleagues**

The staff at the Division of Disability Services wishes to welcome their new colleagues formerly from the Division of Medical Assistance and Health Services.

**CAROL ANDERSON**  
**DONNA BARBALACE**  
**JAMES DEMONTIGNEY**  
**WILLIAM GARDINER**  
**DONALD HARTZ**  
**JAMES JENKINS**

**JOYCE QUINNAN**  
**CARRIE RUFFIN**  
**WILLIAM SAYRE**  
**ANITA SMITH**  
**ANN MARIE TREGLIA**  
**EVELYN WASNIEWSKI**

## **NOTA BENE**

Division Director **William A. B. Ditto** presented a seminar entitled "Promoting Independence Through Control of Service Delivery" at **Beyond Olmstead: Making Home and Community-Based Services Work for All People with Disabilities**. The conference was presented by the U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality, and was held in Chicago on July 11-13, 2001.

**Joseph M. Amoroso**, Supervisor of Information and Referral Services, was elected to a three-year term on the board of directors of AIRS-NJ. AIRS-NJ is New Jersey's Alliance of Information and Referral Services.

Congratulations to Deputy Director **Javier Robles** and his Canine Companion partner **Janus**, on their graduation from Canine Companions for Independence training!

Congratulations to **Patricia Della Vecchia** of the Personal Preference Program, on her graduation from Fordham University School of Social Work!